Official Form 106Sum

Summarize Your Assets

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

	Part 1: 1. Sch 1a. 1b. 1c.
, }	1. <i>Sch</i> 1a.
`	1b.
	1c.
	Part 2:

The state of the s		Your assets Value of what you own
	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$100,000.00
	1b. Copy line 62, Total personal property, from Schedule A/B	<u>\$27,518.12</u>
	1c. Copy line 63, Total of all property on Schedule A/B	<u>\$127,518.12</u>

	Part 2: Summarize Your Liabilities	
*************		Your liabilities Amount you owe
2	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D.	\$203,335.08
3	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$18,692.27
******	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$36,935.61
	Your total liabilities	\$258,962.96

Part 3:	Summarize Your Income and Expenses

4.	Schedule I: Your Income (Official Form 106I)	#0.000.54
	Copy your combined monthly income from line 12 of Schedule I	\$2,662.51
5.	Schedule J: Your Expenses (Official Form 196.I)	

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Ľ	Answer These Questions for Administrative and Statistical Records	
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? ☐ No. You have nothing to report on this part of the form. Check this box and submit this form to the court v schedules. ☐ Yes	with your other
7.	What kind of debt do you have? Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual prima family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9 for statistical purposes. 28 U.S.C. § Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Che submit this form to the court with your other schedules.	159.
8.	From the Statement of Your Current Monthly Income (Official Form 122A-1, 122B, or 122C-1): Copy your total current monthly income from line 11.	\$2,980.95
9.	Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:	
Fre	om Part 4 on <i>Schedule E/F,</i> copy the following:	Total claim
	9a. Domestic support obligations (Copy line 6a.)	\$13,400.00
	9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$5,292.27
	9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$0.00
	9d, Student loans. (Copy line 6f.)	\$0.00
	9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$0.00
	9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	\$0.00
-	9g. Total . Add lines 9a through 9f	\$18.692.27

Debtor 1 OMAR DAVILA-MEJIAS Debtor 2 (Spouse, if filing) United States Bankruptcy Court for the Dist Case number (If known)		☐ Che filin	eck if this is an amended g
Official Form 106A/B Schedule A/B: Prop	erty		12/15
the category where you think it fits best. Be equally responsible for supplying correct in additional pages, write your name and case	ne items. List an asset only once. If an asset fits in as complete and accurate as possible. If two man formation. If more space is needed, attach a sepa number (if known). Answer every question. e, Building, Land or Other Real Estate You O	ied people are filing too ate sheet to this form. (ether, both are On the top of any
Do you own or have any legal or ea No. Go to Part 2. Yes. Where is the property? HACIENDA SAN JOSE Street address, if available, or other description	quitable interest in any residence, building, la What is the property? Check all that apply Single-family home Duplex or multi-unit building	and, or similar proper Do not deduct secured Put the amount of any Schedule D: Creditors	rty? claims or exemptions. secured claims on
110 VILLA CARIBE, CALLE VIA CAFETAL Caguas PR 00725 City, State, ZIP Code	Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other	Secured by Property. Current value of the entire property?	Current value of the portion you own?
Caguas County		\$200,000.00	\$100,000.00
County	Who has an interest in the property? Check one □ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another		your ownership interest nancy by the entireties, or
	Other information you wish to add about this item, such as local property identification number:	Check if this is constructions)	community property
	you own for all of your entries from Part 1, ind for Part 1. Write that number here		\$100,000.00
Part 2: Describe Your Vehicles Do you own, lease, or have legal or eq vehicles you own that someone else drive Leases. 3. Cars, vans, trucks, tractors, sport of No. Yes.	uitable interest in any vehicles, whether they es. If you lease a vehicle, also report it on <i>Sched</i> utility vehicles, motorcycles	are registered or no ule G: Executory Cont	t? Include any racts and Unexpired

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	Make: Model:	Ford Transit	Who has an interest in the property? Check one ☐ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	Do not deduct secured Put the amount of any s Schedule D: Creditors Secured by Property.	secured claims on
	Year: 2011 Approximate mileage: 122,753 Other information:		☐ Debtor 1 and Debtor 2 only At least one of the debtors and another ☐ Check if this is community property (see instructions)	Current value of the entire property?	Current value of the portion you own?
				\$6,089.00	\$6,089.00
3.2	Make: Model: Year: Approxir	VOLKSWAGEN JETTA 1996 nate mileage: 80,000	Who has an interest in the property? Check one ☐ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this is community property	Do not deduct secured Put the amount of any s Schedule D: Creditors Secured by Property. Current value of the entire property?	secured claims on
	Other in:	formation:	(see instructions)	\$1,616.00	\$1,616.00
	tries for		own for all of your entries from Part 2, in Part 2. Write that number here		\$7,705.00
	u own or	escribe Your Personal and have any legal or equitable ns or exemptions)	lousehold Items interest in any of the following items? (Li	st the current value of the po	rtion you own. Do not
		goods and furnishings ajor appliances, furniture, linens, c	hina, kitchenware		
	No Yes (F. BE	RIDGE \$600; STOVE \$200; W D ROOM SET \$500; MICROV	/ASHING MACHINE \$600; DRYER \$150; F	POTS \$100: 2	
			VAVE \$50; TANK \$400; CEILING FAN \$15	io \$2,750.00, D1)	\$2,750.0
Exa		levisions and radios; audio, video,	VAVE \$50; TANK \$400; CEILING FAN \$15 stereo, and digital equipment; computers, printe nes, cameras, media players, games	60 \$2,750.00, D1)	\$2,750.0
Exa	amples: Te lections; el No	elevisions and radios; audio, video, ectronic devices including cell pho	stereo, and digital equipment; computers, printe	i0 \$2,750.00, D1)	\$2,750.0 \$600.0
Exa coll M	amples: Te lections; el No Yes (1 llectibles amples: Ar	elevisions and radios; audio, video, ectronic devices including cell pho TV; 1 DVD; 1 COMPUTER \$ of value	stereo, and digital equipment; computers, printe nes, cameras, media players, games 600.00, D1)	io \$2,750.00, D1) rs, scanners; music	
Exa coll M	Amples: Telections; elections; elections; elections (1) No Yes (1) Ilectibles (1)	elevisions and radios; audio, video, ectronic devices including cell pho TV; 1 DVD; 1 COMPUTER \$ s of value tiques and figurines; paintings, priorall card collections; other collections	stereo, and digital equipment; computers, printe nes, cameras, media players, games 600.00, D1)	rs, scanners; music t objects; stamp,	
Exección Exección Equation Exección Equation Exección	No Yes (1 Ilectibles amples: Ar n, or basel No Yes uipment amples: Sp	ectronic devices including cell photectronic and the collections of the collec	stereo, and digital equipment; computers, printe nes, cameras, media players, games 600.00, D1) nts, or other artwork; books, pictures, or other artins, memorabilia, collectibles	rs, scanners; music t objects; stamp,	
Exección Exección Equation Exección Equation Exección	No Yes (1 No Yes (1 Ilectibles amples: Arn, or baset No Yes uipment amples: Sp i kayaks; c	ectronic devices including cell photectronic and figurines; paintings, prival card collections; other collections of the collections of the collections and hobbies orts, photographic, exercise, and carpentry tools; musical instrument	stereo, and digital equipment; computers, printe nes, cameras, media players, games 600.00, D1) nts, or other artwork; books, pictures, or other artins, memorabilia, collectibles	t objects; stamp, f clubs, skis; canoes	

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/ !				
11.		thes imples	Everyday clothes, furs, leather coats, designer wear, shoes, accessories	
	\square	No Yes	(WEARING CLOTHES \$1,000.00, D1)	\$1,000.00
12.	Exa	velry imples i, silve	Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems,	
	\square	No Yes	(JEWELRY \$20.00, D1)	\$20.00
13.			n animals Dogs, cats, birds, horses	
	\square	No Yes	(CAT \$55.00, D1)	\$55.00
14.		y othe not li	er personal and household items you did not already list, including any health aids you st	
	X 	No Yes		I
15.	Ad atta	d the ached	dollar value of all of your entries from Part 3, including any entries for pages you have for Part 3. Write that number here	
Ра	rt 4:		Describe Your Financial Assets	
Do	you ured	l own daims o	or have any legal or equitable interest in any of the following? (List the current value of the portion rexemptions)	
16.	Cas Exa peti	mples:	Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your	
		No Yes	CASH ON HAND \$1,350.00 (D1)	\$1,350.00
17.	Exa	mples:	of money Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage and other similar institutions. If you have multiple accounts with the same institution, list each.	
		No Yes I	BPPR CORP ACC #7392 \$1,896.23 (D1)	\$1,896.23
		1	BPPR CHECKING ACC 013-962566 \$141.89 (D1)	\$141.89
		1	3PPR SAVING ACC. 2.68 \$0.00 (D1)	
18.	Boi Exa	nds, n mples:	nutual funds, or publicly traded stocks Bond funds, investment accounts with brokerage firms, money market accounts	
and the same of the same	\boxtimes	No Yes.		\$0.00
19.	Noi	n-pub luding	licly traded stock and interests in incorporated and unincorporated businesses, an interest in an LLC, partnership, and joint venture	
	X	No Yes.		\$0.00
20.	Neg	otiable	nent and corporate bonds and other negotiable and non-negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Table instruments are those you cannot transfer to someone by signing or delivering them.	
	I ∑1	Nο		

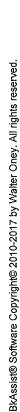
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21.	Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans	
	☑ No ☐ Yes	\$0.00
22.	Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company. Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others	
	☑ No ☐ Yes	\$0.00
23.	Annuities (A contract for a periodic payment of money to you, either for life or for a number of years)	
************	☑ No ☐ Yes	\$0.00
24.	Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified state tuition plan as defined in 26 U.S.C. § 529(b)(1).	
	☑ No ☐ Yes	\$0,00
25.	Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit	A DO TO THE PROPERTY OF THE PR
er e e e e e e e e e e e e e e e e e e	☑ No ☐ Yes	\$0.00
26.	Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements	See
	No No	\$0.00
27.	Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses	2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2
	No	\$0.00
28.	Tax refunds owed to you Give specific information about them, including whether you already filed the returns and the tax years	Section 2007 Section 2004
	No No Yes	\$0.00
29.	Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement	
	☑ No ☐ Yes	\$0,00
30.	Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else	
	□ No Yes COLEGIO WESLEYAN ACADEMY \$4,000.00; PROGRESIVE \$3,500.00; KRISPY CREAM \$1,500.00 \$9,000.00 (D1)	\$9,000.00
31.	Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance. Name the insurance company of each policy and the beneficiary, and list its value	
	⊠ No □ Yes	\$0.00



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grand and		
32.	Any interest in property that is due you from someone who has died if you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died.	
	☑ No☐ Yes	\$0.00
33.	Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue	
***	⊠ No ∏ Yes	\$0.00
34.	Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims	
	⊠ No ☐ Yes	\$0.00
35.	Any financial assets you did not already list	
	No No Yes	\$0.00
36.	Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached for Part 4. Write that number here	\$12,388.12
Pa	ort 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real es	state in Part 1.
37.	Do you own or have any legal or equitable interest in any business-related property? ☐ No. Go to part 6. ☐ Yes. Go to line 38.	
38.	Accounts receivable or commissions you already earned No Yes	
39.	Office equipment, furnishings, and supplies Examples: Business-related computers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices No Yes	
40.	Machinery, fixtures, equipment, supplies you use in business, and tools of your trade	
	No Yes MACHINERY: 2 DRILL; 2 ELECTRIC HAMMER; SET OF CUPS & KEYS; ELECTRIC PUNCHERS; TAPES FOR WIRES; ELECTRIC CABLE; ELECTRIC SANDER; PULLEYS; BASIC TOOLS \$3,000.00 (D1, \$3,000.00)	\$3,000.00
41.	Inventory ☑ No ☐ Yes	
42.	Interests in partnerships or joint ventures ☑ No ☐ Yes	
43.	Customer lists, mailing lists, or other compilations Report lists and compilations containing personally identifiable information (as defined in 11 U.S.C. § 101(41A)) No Yes	
44.	Any business-related property you did not already list	
	☑ No ☐ Yes	\$0.00
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	e dollar value of all of your entries from Part 5, including any entries for p d for Part 5. Write that number here		\$3,000.00
Part 6:	Describe Any Farm- and Commercial Fishing-Related Property You Off you own or have an interest in farmland, list it in Part 1.	wn or Have an Interest li	
propert ⊠ No.	own or have any legal or equitable interest in any farm- or commercial f		
Part 7:	Describe All Property You Own or Have an Interest in That You Did No	ot List Above	
<i>Example</i> ⊠ No	have other property of any kind you did not already list? s: Season tickets, country club membership	***************************************	\$0.00
	dollar value of all of your entries from Part 7, including any entries for pd for Part 7. Write that number here		
Part 8:	List the Totals of Each Part of this Form		Control of the Contro
55. Part 1:	Total real estate, line 2		
56. Part 2:	Total vehicles, line 5	\$7,705.00	
57. Part 3:	Total personal and household items, line 15	\$4,425.00	
58. Part 4:	Total financial assets, line 36	\$12,388.12	
59. Part 5:	Total business-related property, line 45	\$3,000.00	
30. Part 6:	Total farm- and fishing-related property, line 52		
61. Part 7:	Total other property not listed, line 54		
32. Total pe	ersonal property. Add lines 56 through 61		\$27,518.12
33. Total of	all property on Schedule A/B. Add line 55 + line 62		\$127,518.12

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Fill in this information to identify your case:	
Debtor 1 OMAR DAVILA-MEJIAS	
Debtor 2 (Spouse, if filing)	Check if this is an amended filing
United States Bankruptcy Court for the <u>District of Puerto Rico</u>	maig
Case number <u>18-02464</u> (If known)	

Official Form 106C

Schedule C: The Property You Claim as Exempt

04/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on Schedule A/B: Property (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of Part 2: Additional Page as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as Exempt

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - ☐ You are claiming PR state exemptions and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3) ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own Copy the value from Schedule A/B	Am	ount of the exemption you claim Check only one box for each exemption	Specific laws that allow exemption
Ford Transit 2011 (Line 3)	\$6,089.00	⊠ □	\$3,775.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(2)
FRIDGE \$600; STOVE \$200; WASHING MACHINE \$600; DRYER \$150; POTS \$100; 2 BED ROOM SET \$500; MICROWAVE \$50; TANK \$400; CEILING FAN \$150 (Line 6)	\$2,750.00	⊠ □	\$2,750.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(3)
1 TV; 1 DVD; 1 COMPUTER (Line 7)	\$600.00		\$600.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(3)
WEARING CLOTHES (Line 11)	\$1,000.00	×	\$1,000.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(3)
JEWELRY (Line 12)	\$20.00	Ø	\$20.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(4)
CAT (Line 13)	\$55.00	⊠ □	\$55.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(3)

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Debtor 1 OMAR DAVILA-MEJIAS

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own Copy the value from Schedule A/B	Am	ount of the exemption you claim Check only one box for each exemption	Specific laws that allow exemption
CASH ON HAND (Line 16)	\$1,350.00		\$1,350.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(5)
BPPR CHECKING ACC 013-962566 (Line 17)	\$141.89	XI 	\$141.89 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(5)
BPPR CORP ACC #7392 (Line 17)	\$1,896.23	×	\$1,896.23 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(5)
COLEGIO WESLEYAN ACADEMY \$4,000.00; PROGRESIVE \$3,500.00; KRISPY CREAM \$1,500.00 (Line 30)	\$9,000.00	XI C	\$9,000,00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(5)
MACHINERY: 2 DRILL; 2 ELECTRIC HAMMER; SET OF CUPS & KEYS; ELECTRIC PUNCHERS; TAPES FOR WIRES; ELECTRIC CABLE; ELECTRIC SANDER; PULLEYS; BASIC TOOLS (Line 40)	\$3,000.00	Ø	\$2,375.00 + \$625.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(6) and 11 U.S.C. § 522(d)(5)
Total	\$25,902.12		\$23,588.12	

3.		e you claiming a homestead exemption of more than \$160,375.00? Ibject to adjustment on 04/01/2019 and every 3 years after that for cases filed on or after the date of adjustment.)
	⊠ □	No Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case? \[\Pi \] No
		Yes

Case number: 18-02464

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Fill in this information to identify your case: Debtor 1 OMAR DAVILA-MEJIAS		
Debtor 2 (Spouse, if filing) United States Bankruptcy Court for the <u>District of Puerto Rico</u> Case number <u>18-02464</u>		Check if this is an amended filing
Case number 18-02464 (If known) Official Form 106D Schedule D: Creditors Who Have Claims	Secured by Pro	pertv 12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

Do any creditors have claims secured by your property?

No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form. Yes. Fill in all of the information below.

Part 1:

List All Secured Claims

List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As much as possible, list the claims in alphabetical order according to the creditor's name.

		Column A Amount of claim Do not deduct the value of the collateral	Column B Value of collateral that supports this claim	Column C
2.1 Asociacion de Condomines/Preferred Home Services Ceditor's Name PO Box 4069 Number Street	Describe the property that secures the claim: Community Property Located at Haclenda San Jose, Caguas Puerto Rico. The property consists of 4 rooms, 2 bathrooms, family, living room, dining room, and kitchen.	\$7,200.00	\$200,000.00	\$7,200.00
Bayamon PR 00958 City, State, ZIP Code Who owes the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Date debt was incurred: 01/02/2015	As of the date you file, the claim is: Check all that apply Contingent Unliquidated Disputed Nature of lien. Check all that apply An agreement you made (such as mortgage or secured car loan) Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit Other (Including a right to offset) Last 4 digits of account number: 2838			

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Debtor 1 OMAR DAVILA-MEJIAS

Column A Column B Column C Amount of claim Value of collateral Unsecured portion Do not deduct the value of the collateral that supports this if any clalm Describe the property that secures the claim: \$196,135.08 \$200,000.00 \$96,135.08 Community Property Located at Banco Popular de PR - Mortgage Servicing Hacienda San Jose, Caguas Puerto Rico. Creditor's Name PO Box 362708 The property consists of 4 rooms, 2 bathrooms, family, living room, dining Number Street room, and kitchen. As of the date you file, the claim is: Check all that apply San Juan PR 00936-2708 Contingent City, State, Z/P Code Unliquidated Who owes the debt? Check one. Disputed Debtor 1 only Debtor 2 only Nature of lien. check all that apply

An agreement you made (such as Debtor 1 and Debtor 2 only At least one of the debtors and another mortgage or secured car loan) Statutory lien (such as tax lien, mechanic's Check if this claim relates to a community lien) Judgment lien from a lawsuit Other (including a right to offset) Date debt was incurred: 08/16/2002 Last 4 digits of account number: 2838 Describe the property that secures the claim: \$0.00 \$200,000.00 Community Property Located at Haclenda San Jose, Caguas Puerto Rico. Creditor's Nam PO BOX 195387 The property consists of 4 rooms, 2 bathrooms, family, living room, dining Number Street room, and kitchen. San Juan PR 00919-5387 As of the date you file, the claim is: check all that apply Continuent Unliquidated Who owes the debt? Check one, Disputed Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only Nature of lien, check all that apply An agreement you made (such as At least one of the debtors and another mortgage or secured car loan) Statutory lien (such as tax lien, mechanic's Check if this claim relates to a community iien) Judgment lien from a lawsuit Other (including a right to offset) Date debt was incurred: 2002

Part 2:

CRIM

List Others to Be Notified for a Debt That You Already Listed

Add the dollar value of your entries in Column A. Write that number here:

Last 4 digits of account number: 2838

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

\$203,335.08

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Case number: 18-02464

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Fill in this information to identify your case:	
Debtor 1 OMAR DAVILA-MEJIAS	
Debtor 2 (Spouse, if filing)	Check if this is an amended filing
United States Bankruptcy Court for the District of Puerto Rico	
Case number <u>18-02464</u> (If known)	

Official Form 106E/F

No. Go to Part 2.

Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Hold Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known).

J.

Part 1:

List All of Your PRIORITY Unsecured Claims

Do any creditors have priority unsecured claims against you?

	Z res.
2.	List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.)
	A Sign Holder on A catalog Control of the Control o

		Total claim	Priority amount Nonp	oriority amount
2.1 Jessica Quintero Caraballo Priority Creditor's Name Hactenda San Jose, Villa Caribe Number Street Via Cafetal 307 Caguas PR 00727 City, state, zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt is the claim subject to offset? No Yes	Last 4 digits of account number: -0510 When was the debt incurred: 2016 As of the date you file, the claim is: check all that apply Contingent Unitquidated Disputed Type of PRIORITY unsecured claim: Domestic support obligations Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated Other. Specify	\$11,900.00	\$11,900.00	\$0.00
2.2 Lcdo, Francisco Radinson Caraballo Priority Creditor's Name Urbanizacion Caparra Terrace Number Street 1146 Ave. Americo Miranda San Juan PR 00921-2213 City, State, ZIP Code Who Incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes	Last 4 digits of account number: -0510 When was the debt incurred: 2016 As of the date you file, the claim is: Check all that apply Contingent Unliquidated Disputed Type of PRIORITY unsecured claim: Domestic support obligations Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated Other. Specify	\$1,500.00	\$1,500.00	\$0.00

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Debtor 1 OMAR DAVILA-MEJIAS

Case number: 18-02464

		Total claim	riority amount No	npriority amount
2.3 DEPARTAMENTO DE HACIENDA Priority Creditar's Name	Last 4 digits of account number: 2838 When was the debt incurred: 2016	\$191.09	\$169.00	\$22.09
PO BOX 9024140 Number Street	As of the date you file, the claim is: Check all that apply Contingent Unliquidated			
San Juan PR 00902-4140 City, State, ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt is the claim subject to offset?	Type of PRIORITY unsecured claim: □ Domestic support obligations ■ Taxes and certain other debts you owe the government □ Claims for death or personal injury while you were intoxicated □ Other. Specify			
Yes	i set A digite of account number 2020	₽₽ 404 40	\$2.202.42	
2.4 INTERNAL REVENUE SERVICE	Last 4 digits of account number: 2838	\$5,101.18	\$3,362.43	\$1,738.75
Priority Creditor's Name PO BOX 7346	When was the debt incurred: 2012			
Number Street	As of the date you file, the claim is: Check all that apply Contingent Unliquidated Disputed			
Philadelphia PA 19101-7346	☐ Disputed			
Who incurred the debt? Check one. Debtor 1 only Debtor 2 only	Type of PRIORITY unsecured claim: ☐ Domestic support obligations ☑ Taxes and certain other debts you owe			
Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt	the government Claims for death or personal injury while			
A clear of the centers at a lateral to the claim subject to offset?	you were intoxicated Other. Specify			
☐ Yes				
 Do any creditors have nonpriority u No. You have nothing to report in Yes. List all of your nonpriority unsecure priority unsecured claim, list the credit already included in Part 1. If more than 	this part. Submit this form to the court with your old claims in the alphabetical order of the creat reparately for each claim. For each claim listen one creditor holds a particular claim, list the off	ditor who holds each o	claim it is. Do not list	claims
unsecured claims fill out the Continuat	ion Page of Part 2.		Sept.	Total claim
	1 - 1 4 4 - 1 - 1 - 1 - 1 - 1 - 1 - 1	0000		to district the property of the section
4.1 AUXILIO MUTUO	Last 4 digits of account numb	er: 2838		\$594.00
Nonpriority Creditor's Name PO BOX 191227	When was the debt incurred:	01/02/2015		
Number Street	As of the date you file, the cla ☐ Contingent ☐ Unliquidated	irn IS: Check all that apply		
San Juan PR 00919 City, State, ZiP Code	☐ Disputed			
Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	you did not report as pri	of a separation agreement of ority claims		
At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes	☐ Debts to pension or prol ☑ Other. Specify Insurance	fit-sharing plans, and other ce	similar debts	

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Debtor 1 OMAR DAVILA-MEJIAS Case number: 18-02464 Total claim Last 4 digits of account number: 2838 \$10.603.61 4.2 BANCO POPULAR AUTO When was the debt incurred: 09/04/2013 Nonpriority Creditor's Name PO BOX 50045 As of the date you file, the claim is: Check all that apply Contingent B Unliquidated San Juan PR 00902 Disputed City, State, ZIP Co Type of NONPRIORITY unsecured claim: Who incurred the debt? Check one. Student loans Debtor 1 only Obligations arising out of a separation agreement or divorce that Debtor 2 only you did not report as priority claims Debtor 1 and Debtor 2 only At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Other. Specify Car Loan-Deficiency Check if this claim is for a community debt Is the claim subject to offset? Yes Last 4 digits of account number: 2838 \$17,029.00 4.3 Banco Popular de PR - Bankruptcy Division When was the debt incurred: 12/08/2006 Nonpriority Creditor's Name PO BOX 366818 As of the date you file, the claim is: Check all that apply Contingent Unliquidated Disputed San Juan PR 00936-6818 Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Obligations arising out of a separation agreement or divorce that Debtor 2 only you did not report as priority claims Debtor 1 and Debtor 2 only At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Other. Specify Master Card - Credit Card Check if this claim is for a community debt is the claim subject to offset? X No Yes Last 4 digits of account number: 2838 \$0.00 CryoCell International When was the debt incurred: UNKNOWN Nonpriority Creditor's Name 700 Brooker Creek Bivd. As of the date you file, the claim is: Check all that apply Contingent Unliquidated Sulte #1800 Disputed Oldsmar FL 34677 City, State, ZiP Code Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Obligations arising out of a separation agreement or divorce that Debtor 2 only you did not report as priority claims

Debts to pension or profit-sharing plans, and other similar debts Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Other, Specify Other is the claim subject to offset? X No Yes Last 4 digits of account number: \$1,800.00 Lcda. Julia Gonzalez del Valle When was the debt incurred: UNKNOWN Nonoriority Creditor's Name 315 Ave. Manuel Domenech Suite 3 As of the date you file, the claim is: Check all that apply Contingent Unliquidated Disputed San Juan PR 00910 Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Obligations arising out of a separation agreement or divorce that Debtor 2 only you did not report as priority claims Debtor 1 and Debtor 2 only At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim is for a community debt Other, Specify Other the claim subject to offset? Yes

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Debtor 1 OMAR DAVILA-MEJIAS

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		Total claim
4.6 SEARS CREDIT CARDS Nonpriority Creditor's Name Citi Credit Services Att. Centralized Bankruptcy Dept Number Street PO Box 20507 Kansas City MO 64195 City, State, ZIP Code Who Incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt is the claim subject to offset? No Yes	Last 4 digits of account number: 2838 When was the debt incurred: 07/25/2011 As of the date you file, the claim is: Check all that apply Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Credit Card	\$6,909.00
4.7 US DEPARTMENT OF JUSTICE Nonpriority Creditor's Name 950 Pennsylvania Avenue, NW Number Street *Washington DC 20530-0001 City, State, ZIP Code Who Incurred the debt? Check one. □ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? No □ Yes	Last 4 digits of account number: When was the debt incurred: UNKNOWN As of the date you file, the claim is: Check all that apply Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify NOTICE ONLY	\$0.00
example, if a collection agency is trying to collection agency here. Similarly,	Debt That You Already Listed Itified about your bankruptcy, for a debt that you already listed in Parts lect from you for a debt you owe to someone else, list the original cred if you have more than one creditor for any of the debts that you listed re additional persons to be notified for any debts in Parts 1 or 2, do not On which entry in Part 1 or Part 2 did you list the original cred Line 2.4 of (Check one):	itor in Parts 1 or 2, In Parts 1 or 2, list fill out or submit itor?

Part 4:

City, State, ZIP Code

Philadelphia PA 19101-7346

Add the Amounts for Each Type of Unsecured Claim

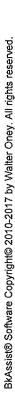
 Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

		Total claim
Total Claims from Total Claims		
Part 1 6a. Domestic support obligations	6a.	\$13,400.00
6b. Taxes and certain other debts you owe the government	6b.	\$5,292.27
6c. Claims for death or personal injury while you were intoxicated	6c.	\$0.00
6d. Other. Add all other priority unsecured claims. Write that amount here	6d.	\$0.00
6e. Total Add lines 6a through 6d.	6e.	<u>\$18,692.27</u>

Case number: 18-02464

Case:18-02464-BKT13 Doc#:18 Filed:06/06/18 Entered:06/06/18 18:15:25 Desc: Main Document Page 17 of 43

Total & STALL		Total claim
claims from Part 2 6f. Student loans	6f	\$0.00
6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g	\$0.00
6h. Debts to pension or profit-sharing plans, and other similar debts	6h.	\$0.00
6i. Other. Add all other nonpriority unsecured claims. Write that amount here	6i	\$36,935.61
6j. Total. Add lines 6f through 6i.	6j. <u>.</u>	\$36,935.61



Fill in this information to identify your case:

OMAR DAVILA-MEJIAS

Debtor 1

filing) ates Bankruptcy Court for the <u>District of Puerto Rico</u> nber <u>18-02464</u>	Check if th	nis is an amended			
Form 106G ule G: Executory Contracts	s and Unexpired Leases	12/15			
	re filing together, both are equally responsible for supplyir Il it out, number the entries, and attach it to this page. On t				
	other schedules. You have nothing else to report on this form. or leases are listed on Schedule A/B: Property (Official Form 10				
2. List separately each person or company with whom you have the contract or lease. Then state what each contrevample, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more example and unexpired leases.					
company with whom you have the contract or le	ease State what the contract or lease is LEASE RESIDENTIAL CONTRACT (\$350 MONT	a. 5 % Green, a trib and an acceptance of			
s Name Street					
ate, ZIP Code					

Fill in this information to identify your case:		
Debtor 1 OMAR DAVILA-MEJIAS		
Debtor 2 (Spouse, if filing)	П	Check if this is an amended
United States Bankruptcy Court for the <u>District of Puerto Rico</u>	_	filing
Case number <u>18-02464</u> (If known)		

Official Form 106H

Schedule H: Your Codebtors

12/15

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.

1. Do you have any codebtors? (If you are filing a joint case, do not list either spouse as a codebtor.)

ithin the last 8 years, have you lived in a community property state ritories include Arizona, California, Idaho, Louisiana, Nevada, New Mex No. Go to line 3. Yes. Did your spouse, former spouse, or legal equivalent live with you No Yes. In which community state or territory did you live? PR. Fill in HACIENDA SAN JOSE, CAGUAS Column 1, list all of your codebtors. Do not include your spouse as a person shown in line 2 again as a codebtor only if that person is a creditor on Schedule D (Official Form 106D), Schedule E/F (Official GG). Use Schedule D, Schedule E/F, or Schedule G to fill out Columns.	ico, P u at the the r s a co a gua al Foi	Puerto Rico, Texas, Washington, and Wisconsin.) The time? The time and current address of that person. The time are a time and the time are a tim
Column 1, list all of your codebtors. Do not include your spouse as e person shown in line 2 again as a codebtor only if that person is e creditor on <i>Schedule D</i> (Official Form 106D), <i>Schedule E/F</i> (Official	a gua al Foi	rantor or cosigner. Make sure you have listed
e person shown in line 2 again as a codebtor only if that person is e creditor on <i>Schedule D</i> (Official Form 106D), <i>Schedule E/F</i> (Offici	a gua al Foi	rantor or cosigner. Make sure you have listed
a 1: Your codebtor	Co	lumn 2: The creditor to whom you owe the debt
	Ch	eck all schedules that apply
ssica Quintero Caraballo me		Schedule D, line <u>2.1</u> Schedule E/F, line Schedule G, line
mber Street a Cafetal 307		
guas PR 00727 ,, State, ZIP Code		
ssica Quintero Caraballo ne icienda San Jose		Schedule D, line Schedule E/F, line <u>4.2</u> Schedule G, line
a Cafetal 307 guas PR 00727		
	ssica Quintero Caraballo me icienda San Jose mber Street a Cafetal 307 quas PR 00727 f, State, ZIP Code ssica Quintero Caraballo me icienda San Jose mber Street a Cafetal 307	Ssica Quintero Caraballo me icienda San Jose mber Street a Cafetal 307 quas PR 00727 f, State, ZIP Code ssica Quintero Caraballo me icienda San Jose mber Street a Cafetal 307 quas PR 00727

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Case number: 18-02464

Debtor 1 OMAR DAVILA-MEJIAS

Column 1: Your codebtor	Column 2: The creditor to whom you owe the debt Check all schedules that apply
3.3 Jessica Quintero Caraballo Name Hacienda San Jose, VIIIa Caribe Number Street Via Cafetal 307 Caguas PR 00727 City, State, ZIP Code	Check all schedules that apply ☐ Schedule D, line ☐ Schedule E/F, line 4.3 ☐ Schedule G, line
3.4 Jessica Quintero Caraballo Name Hacienda San Jose Number Street Via Cafetal 307 Caguas PR 00727 City, State, ZIP Code	Schedule D, line <u>2.2</u> Schedule E/F, line Schedule G, line
3.5 Jessica Quintero Caraballo Name Hacienda San Jose Number Street Via Cafetal 307 Caguas PR 00727 City, State, ZIP Code	Schedule D, line 2.3 Schedule E/F, line Schedule G, line
3.6 Jessica Quintero Caraballo Name Hacienda San Jose Number Street Via Cafetal 307 Caquas PR 00727 City, State, ZIP Code	☐ Schedule D, line ☐ Schedule E/F, line 4.4 ☐ Schedule G, line

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Debtor 1 OMAR DAVILA-ME. Debtor 2 (Spouse, if filing) United States Bankruptcy Court for Case number (If known)	JIAS			☐ A supple	ided filing ment showing tion chapter 13
supplying correct information. If you spouse, if you are separated and y	ossible. If two married people are fi ou are married and not filing jointly our spouse is not filing with you, c	/, and your spouse is i to not include informa	iving with yo tion about y	ou, include informa our spouse. If more	tion about your space is needed,
Part 1: Describe Employ	n. On the top of any additional pag	es, write your name a	nd case num	iber (if known). Ans	wer every question.
I. Fill in your employment information	Employment status	Debtor 1		Debtor 2 or non-f	• .
If you have more than one job, attach a separate page with information about additional employers.	Occupation Employer's name Employer's address	☑ Not employed N/A N/A		☐ Not employed N/A N/A	
Include part-time, seasonal, or self-employed work.	How long employed there?	N/A		N/A	
	ut Monthly Income				
Including your non-filing spou If you or your non-filing spouse h	If the date you file this form. If you are separated. If you are separated, and the more than one employer, contact a separate sheet to this for	embine the informatio	-	<u>-</u>	•
				For Debtor 1	For Debtor 2 or non-filing
List monthly gross wages, sal if not paid monthly, calculate wh	ary, and commissions before all pa	yroll deductions).	2.	\$0.00	spouse
if not paid monthly, calculate where the string is a string of the string in the string in the string is a string of the string in the string in the string is a string of the string in the string in the string is a string in the string in the string in the string in the string is a string in the	, 0		3.	\$0.00	
I. Calculate gross income. Add li			4.	\$0.00	
i. List All payroll deductions:					
5a. Tax, Medicare, and Socia	Security deductions		5a.	\$0.00	

5b. Mandatory contributions for retirement plans

5b.

\$0.00

Case number: 18-02464

For Debtor 2

or non-filing

For Debtor 1

Debtor 1 OMAR DAVILA-MEJIAS

						spouse	•
	5c.	Voluntary contributions for retirement plans	5c.	\$	0.00		
	5d.	Required repayments of retirement fund loans	5d.	\$	0.00	A combination of the combination	
	5e.	Insurance	5e.	\$	0.00		
	5f.	Domestic support obligations	5f.	\$	0.00	The second second	
	5g.	Union dues	5g.	\$	0.00		
	5h.	Other deductions. Specify:	5h.	\$	0.00		
6.	Add	the payroll deductions. Add lines 5a through 5h	6.	\$	0.00		
7.	Cald	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	0.00		
8.	List	all other income regularly received:					
8	8a.	Net income from rental property and from operating a business, profession, or farm	8a.	\$2,66	2.51		name and property and an
		Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.					100 pt 10
	8b.	Interest and dividends	8b.	\$	0.00		
	8c. Family support payments that you, a non-filing spouse, or a dependent 8c. regularly receive						22, 191101
		Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.					A PARA
	8d.	Unemployment compensation	8d.	\$	0.00	2	
	8e.	Social Security	8e.	\$	0.00		And a second
	8f.	Other government assistance that you regularly receive	8f.	\$	0.00		service and service
		Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:					V V
	8g.	Pension or retirement income	8g.	\$	0.00		
	8h.	Other monthly income. Specify:	8h.	\$	0.00		
9.	Add	all other Income. Add lines 8a-8h.	9.	\$2,66	2.51		di cara di mangani da
10.		culate monthly income. Add line 7 + line 9. the entries in line 9 for Debtor 1 and Debtor 2 or non-filing spouse.		10.	\$2 ,	,662.51	
11.	Stat (Off	e all other regular contributions to the expenses that you list in Schedule Jicial Form 106J).		11.		\$0.00	
		de contributions from an unmarried partner, members of your household, your endents, your roommates, and other friends or relatives.	por gravery and produce				
		not include any amounts already included in lines 2-10 or amounts that are not available to expenses listed in Schedule J (Official Form 106J).	THE PROPERTY OF STREET		the first hand a read of the		
	Spe	cify:		A MARKAN OF SPECIA		A distant for the set	
12.	 Add the amounts on lines 10 and 11. The result is the combined monthly income. Also write that amount on the Summary of Your Assets and Liabilities and Certain Statistical Information (Official Form 106Sum) if it applies. 				\$2,662.51		

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Debtor 1 OMAR DAVILA-MEJIAS Case number: 18-02464

		Increase or de		nin the year aft		 	 	
Value of the control	No Yes. Explain		· · · · · · · · · · · · · · · · · · ·					A THE STATE OF THE



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Fill in this in	nformation to identify your case:
Debtor 1 C	MAR DAVILA-MEJIAS
Debtor 2 (Spouse, if filing)
United States	Bankruptcy Court for the District of Puerto Rico
Case number (If known)	18-02464

Check if this is an amended filing

Form 106lSupp

BKA-106ISupp

12/15

Itemize the income and expenses from business activities and real estate

Part 1:

Business income & expense

ABSCISSA (Corporation):

BUSINESS PROMOTION UNIFORMS	(\$95.00) (\$41.66)
TOLL	(\$60.00)
TRAVEL & ENTERTAINMENT	(\$100.00)
PROFFESIONAL CONTINUED EDUCATION	(\$12.50)
COMPULSORY ELECTRICIANS ASSOCIATION MEMBERSHIP	(\$83.33)
TRANSPORTATION	(\$400.00)
INVENTORY PURCHASES	(\$200.00)
	\$3,750.00

Part 2:

Non-residential real property income & expense

There is no real property income or expense to report.

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Fill in this information to identify your case: Debtor 1			ck if this is: An amended filing A supplement showing post-petition chapter 13 expenses as of
Official Form 106J Schedule J: Your Expenses			12/15
Be as complete and accurate as possible. If two married peop information. If more space is needed, attach another sheet to number (if known). Answer every question. Part 1: Describe Your Household	le are filing together, bot this form. On the top of a	h are equally responsible fo any additional pages, write y	or supplying correct your name and case
1. Is this a joint case?			
No. Go to line 2. ☐ Yes. Does Debtor 2 live in a separate household?			
No.☐ Yes. Debtor 2 must file Official Form 106J-2, Expe	enses for Separate Househ	oold of Debtor 2	
2. Do you have dependents? ☐ No Do not list Debtor 1 or Debtor 2. ☒ Yes. Fill out this	Dependent's relationship to Debto 1 or Debtor 2	Dependent's age r	Does dependent live with you?
information for Do not state the dependents' each dependent	Son	19	□ No ⊠ Yes
names.	Son	8	⊠ No
	Daughter	12	☐ Yes ⊠ No ☐ Yes
3. Do your expenses include expenses of people other than dependents?	yourself and your	⊠ No ☐ Yes	
Part 2: Estimate Your Ongoing Monthly Expense	es		***************************************
Estimate your expenses as your bankruptcy filing date unle expenses as of a date after the bankruptcy is filed. If this is the applicable date	ess you are using this fo		
Include expenses paid for with non-cash governmental ass Schedule I: Your Income(Official Form 106I).	sistance if you know the	value of such assistance	and have included it on
Note: Expenses for property other than the debtor(s)' primary res Expense annexed to Schedule I.	idence(s), if any, are repor	ted in the Summary of Busine	ess/Real-Estate Income &
Note: Monthly payments that are being made through the Chapte	er 13 Plan, if any, are not ir	ncluded in the expenses listed	production with the reservation of the second
			Your expenses
The rental or home ownership expenses for your residen mortgage payments and any rent for the ground or lot.	ce. Include first	4.	\$350.00

If not included in line 4:

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	4.	
4a. Real estate taxes	4 a.	
4b. Property, homeowner's, or renter's insurance	4b.	
4c. Home maintenance, repair, and upkeep expenses	4c.	
4d. Homeowner's association or condominium dues	4d.	
Additional mortgage payments for your residence, such as home equity loans	5.	.,.,
Utilities:	ų.	***************************************
6a. Electricity, heat, natural gas	6a.	\$60.00
6b. Water, sewer, garbage collection	6b.	\$40.00
6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	\$100.00
6d. Other. Specify: N/A	6d.	
Food and housekeeping supplies	7.	\$200.51
Childcare and children's education costs	8.	\$200.00
Clothing, laundry, and dry cleaning	9.	\$70.00
). Personal care products and services	10.	\$60.00
. Medical and dental expenses	11.	\$50.00
 Transportation. Include gas, maintenance, bus or train fare. Do not include car payments. 	12.	
. Entertainment, clubs, recreation, newspapers, magazine, and books	13.	
. Charitable contributions and religious donations	14.	
 Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 		·
15a. Life insurance	15a.	
15b. Health insurance	15b.	
15c. Vehicle insurance	15c.	\$32.00
15d. Other insurance. Specify: N/A	15d.	
Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: N/A	16.	
. Installment or lease payments	į	••••
(None)	17.	\$0.00
 Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I (Official Form 106I) 	18.	\$1,200.00
 Other payments you make to support others who do not live with you. Specify: N/A 	19.	,
 Other real property expenses not included in lines 4 or 5 of this form or on Schedule I (Official Form 106I) 	1.	
20a. Mortgages on other property	20a.	
20b. Real estate taxes	20b.	. ,
20c. Property, homeowner's, or renter's insurance	20c.	
20d. Maintenance, repair, and upkeep expenses	20d.	
20e. Homeowner's association or condominium dues	20e.	

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		!	Your expenses				
	20f. Other. Specify:	20f.					
21.	Other. Specify: N/A	21.					
22.	Calculate your monthly expenses.						
	22a. Add lines 4 through 21.	22a.	\$2,362.51				
:	22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2	22b.	-, ······				
	22c. Add line 22a and 22b. The result is your monthly expenses.	22c.	\$2,362.51				
	23a. Copy line 12 (your combined monthly income) from Schedule I	23a.	\$2,662.51				
	23b. Copy your monthly expenses from line 22 above.	23b.	\$2,362.51				
	23c. Subtract your monthly expenses from your monthly income. The result is your monthly net income	23c.	\$300.00				
24.	Do you expect an increase or decrease in your expenses within the year after you file this form	?					
	For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?						
	No		a and analysis services and a service services of the				

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Fill in this information to identify your case:		
Debtor 1 OMAR DAVILA-MEJIAS Debtor 2 (Spouse, if filing) United States Bankruptcy Court for the District of Puerto Rico	_	Check if this is an amended filing
Case number 18-02464 Official Form 106Dec Declaration About an Individual Debtor's Schedules		12/15
If two married people are filing together, both are equally responsible for supplying correct information You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$2	stateme	nt, concealing property, or
years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankr		

Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they

06/06/2018 Date

06/06/2018 Date

are true and correct.

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	Fill in this information to iden	tify your cas	e:						
	Debtor 1 OMAR DAVILA-MEJIA								
	Debtor 2 (Spouse, if filing)					П	Check if this is an amended		
		the District of	Buarta Bias			-	filing		
1	United States Bankruptcy Court for	the <u>District of</u>	Puerto Rico						
	Case number <u>18-02464</u> (If known)								
L									
	<u>fficial Form 107</u> atement of Financial A	ffaire for	Individual	le Eilina for	Pankruntov		04/46		
31	atement of Financial A	mairs ior	iiiuiviuuai	is Filting for	Dankiupicy		04/16		
info	as complete and accurate as pos ormation. If more space is needed onber (if known). Answer every qu	l, attach a sepa							
Pa	art 1: Give Details About	t Your Marita	l Status and '	Where You Live	ed Before				
1.	What is your current marital	status?							
	☐ Married☑ Not married								
2.	During the last 3 years, have you lived anywhere other than where you live now? ☐ No								
	Yes. List all of the places you lived in the last 3 years. Do not include where you live now.								
	Debtor 1		Dates Debtor there	1 lived Debtor	2		Dates Debtor 2 lived there		
	Barrio Quebrada Arena, San	Juan, PR		Sam	e as Debtor 1		☐ Same as Debtor 1		
			03/01/2016 to 03/01/2018	N/A			N/A to N/A		
3.	Within the last 8 years, did y (Community property states an Texas, Washington, and Wisco ☐ No ☐ Yes. Make sure you fill ou	nd territories in onsin.)	nclude Arizona	a, California, Ida	ho, Louisiana, Nevada	/ propei a, New M	rty state or territory? Mexico, Puerto Rico,		
Pa	art 2: Explain the Source	es of Your Inc	come						
4.	Did you have any income from			nerating a busi	ness during this year	r or the	two previous calendar		
7.	years? Fill in the total amount of inconjoint case and you have incom	ne you receive	ed from all job	s and all busine	sses, including part-tin		•		
	☐ No ☐ Yes. Fill in the details.	e mai you rec	eive togetiler,	, nacticolity office	under Debtor 1.				
		Dobtord			nglizan	en mare property Jegogypie inge			
		Debtor 1			Debtor 2				
		Sources of Check all tha	it apply (Gross income before deductions exclusions)	Sources of in and Check all that ap		Gross income (before deductions and exclusions)		
	From January 1 of current		commissions,		☐ Wages, com				
8 10 km min 1990 min	year until the date you filed for bankruptcy:	bonuses, Operating	, tips g a business		bonuses, tips Operating a l				

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				urces of income ock all that apply	Gross income (before deductions and exclusions)		urces of income eck all that apply	Gross income (before deductions and exclusions)
		t calendar year: 1 to December 31, 2017)	⊠	Wages, commissions, bonuses, tips Operating a business	\$24,495.00		Wages, commissions, bonuses, tips Operating a business	
	before	calendar year that: 1 to December 31, 2016)	⊠	Wages, commissions, bonuses, tips Operating a business	\$24,495.00		Wages, commissions, bonuses, tips Operating a business	
5.	Include Security lawsuits togethe	income regardless of	wheth I other ling an er Deb	er that income is tax public benefit payme d lottery winnings. If tor 1.	r the two previous cale able. Examples of other ents; pensions; rental ind you are filing a joint cas e separately. Do not inc	inco come se an	me are alimony; chil ; interest; dividends; d you have income t	money collected from that you received
	⊠ No ☐ Yes	s. Fill in the details.				4		
P	art 3:	List Certain Payn	nents \	∕ou Made Before Y	ou Filed for Bankruptc	y		
6.	Are eitl	ner Debtor 1's or De	otor 2's	s debts primarily c	onsumer debts?			
***************************************	□ No	Neither Debtor 1 ne "incurred by an indiv	or Deb vidual p	tor 2 has primarily primarily for a person	consumer debts. Cons al, family, or household	sume purp	<i>r debt</i> s are defined í ose."	n 11 U.S.C. § 101(8) as
		During the 90 days	oefore	you filed for bankrup	otcy, did you pay any cre	ditor	a total of \$6,425.00	* or more?
		☐ No. Go to line	7.					
		amount you	paid ۱ ب	hat creditor. Do not	paid a total of \$6,425.0 include payments for do ments to an attorney for	mest	tic support obligation	e payments and the total as, such as child support
		* Subject to adjustm	ent on	04/01/2019 and eve	ry 3 years after that for	case	s filed on or after the	date of adjustment.
	⊠ Yes	s. Debtor 1 or Debto	r 2 or k	ooth have primarily	consumer debts.			
		During the 90 days I	efore	you filed for bankrup	tcy, did you pay any cre	ditor	a total of \$600 or me	ore?
		No. Go to line	7 .					
Control of the contro		Do not incl	ude pa		paid a total of \$600 or r support obligations, suc is bankruptcy case.			
7.	Insiders partner; securitie paymen No	include your relatives corporations of which es; and any managing	s; any (n you a s agent ort oblig	general partners; rela re an officer, directo , including one for a pations, such as child	u make a payment on a atives of any general pa r, person in control, or o business you operate a d support and alimony.	rtner: wner	s; partnerships of what of 20% or more of t	heir voting
8.	that bea Include ⊠ No	1 year before you fil nefited an insider? payments on debts g s. List all payments th	uarante	eed or cosigned by a		or tr	ansfer any propert	y on account of a debt
		The state of the s					,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
Pá	ırt 4:	Identify Legal Act	ions, f	Repossessions, an	d Foreclosures			

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Debtor 1 OMAR DAVILA-MEJIAS

Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. Yes. Fill in the details 10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. 11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? \boxtimes No Yes. Fill in the details Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official? No Yes List Certain Gifts and Contributions Part 5: 13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? No Yes. Fill in the details for each gift. 14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? No Yes. Fill in the details of each gift or contribution Part 6: List Certain Losses 15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling? No Yes. Fill in the details Part 7: List Certain Payments or Transfers 16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. No Yes. Fill in the details \times Description and value of any property Date payment Amount of payment Person who was paid or transfer transferred was made

Case number: 18-02464

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Debtor 1 OMAR DAVILA-MEJIAS Case number: 18-02464

	Carlos Alberto Ruiz PO Box 1298 Caguas, PR 00726	Expense & fee retainer (including any retainer for the filing fee)	05/03/2018	\$1,310.00
	Email or website address: carlosalbertoruizquiebras@gmail.com			
	Person Who Made the Payment if Not You:			
1 7.	Within 1 year before you filed for bankrup property to anyone who promised to help Do not include any payment or transfer that No Yes. Fill in the details.	you deal with your creditors or to make	ur behalf pay or trai payments to your c	nsfer any reditors?
i 8.		uptcy, did you sell, trade, or otherwise tra course of your business or financial affal made as security (such as the granting of a that you have already listed on this statemer	rs? security interest or m	-
19.	Within 10 years before you filed for bank which you are a beneficiary? (These are only No Yes. Fill in the details	ruptcy, did you transfer any property to a fee called asset-protection devices.)	self-settled trust or	similar device of
Pa	art 8: List Certain Financial Accounts	s, Instruments, Safe Deposit Boxes, and S	torage Units	
20.	Within 1 year before you filed for bankrup benefit, closed, sold, moved, or transferr Include checking, savings, money market, obrokerage houses, pension funds, cooperation No Yes. Fill in the details	ed? r other financial accounts; certificates of dep	osit; shares in banks	
21.	Do you now have, or did you have within for securities, cash, or other valuables? ☑ No ☐ Yes. Fill in the details.	1 year before you filed for bankruptcy, ar	ny safe deposit box	or other depositor
22.	Have you stored property in a storage un ☑ No ☐ Yes. Fill in the details.	it or place other than your home within 1	year before you file	ed for bankruptcy?
Pa	art 9: Identify Property You Hold or C	Control for Someone Else		
	Do you hold or control any property that hold in trust for someone.	mana antinuasimami il ila 1800 eti ili ili ili ili ili ili ili ili ili i	you borrowed from,	are storing for, or

For the purpose of Part 10, the following definitions apply:

 Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including

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statutes or regulations controlling the cleant Site means any location, facility, or property or used to own, operate, or utilize it, includir Hazardous material means anything an env hazardous material, pollutant, contaminant,	vas defined under any environmental law, v ng disposal sites. ironmental law defines as a hazardous was or similar term.	whether you now own, operate, or utilize it ste, hazardous substance, toxic substance,						
Report all notices, releases, and proceedings the	nat you know about, regardless of when the	y occurred.						
Has any governmental unit notified you to environmental law? No Yes. Fill in the details	that you may be liable or potentially liabl	e under or in violation of an						
25. Have you notified any governmental unit ⊠ No □ Yes. Fill in the details								
26. Have you been a party in any judicial or a and orders. ⊠ No □ Yes. Fill in the details	administrative proceeding under any en	rironmental law? Include settlements						
Part 11: Give Details About Your Busin	ess or Connections to Any Business							
☐ A member of a limited liability com☐ A partner in a partnership☐ An officer, director, or managing ex	in a trade, profession, or other activity, eithpany (LLC) or limited liability partnership (Lecutive of a corporation ng or equity securities of a corporation Part 12.	er full-time or part-time						
Business name and address	Describe the nature of the business and identify the accountant or bookkeeper	Employer identification number (Do not include SSN or ITIN) Dates business existed						
ABSCISSA	ELECTRIC SERVICES	660764300						
LAS HACIENDA 15057 CALLE CUARTO CAMINO Canovanas, PR 00729	N/A	01/02/2001 to Present						
28. Within 2 years before you filed for bankr Include all financial institutions, creditor ☑ No ☐ Yes. Fill in the details below.	uptcy, did you give a financial statement s, or other parties.	to anyone about your business?						
Part 12: Sign Below								
I have read the answers on this Statement of Fi answers are true and correct. I understand that fraud in connection with a bankruptcy case can U.S.C. §§ 152, 1341, 1519, and 3571.	making a false statement, concealing prop	erty, or obtaining money or property by						
/s/ OMAR DAVILA-MEJIA\$ Signature/6/Debtor 1	1	<u>06/06/2018</u> Date						
Signature of Debtor 2		06/06/2018 Date						

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Did you ⊠ □	uattach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? No Yes
	pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?
	No Yes. Name of person N/A the BkAssist software used to prepare this petition is licensed for use only by attorneys.



3	֚֚֚֚֚֚֓֝֜֝֜֝֜֜֝֜֜֜֜֝֜֜֜֝֜֜֜֓֓֓֓֜֜֜֜֝֓֓֓֓֓֜֜֜֝֡֓֜֜֜֡֡֜֜֜֡֡
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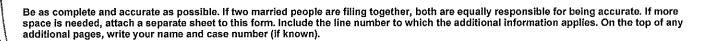
Fill in this information to identify your case:					
Debtor 1 OMAR DAVILA-MEJIAS					
Debtor 2 (Spouse, if filing)					
United States Bankruptcy Court for the District of Puerto Rico					
Case number 18-02464 (If known)					
(ir known)					

Check as directed in lines 17 and 21:
According to the calculations required by this Statement:
1. Disposable income is not determined under 11 U.S.C. § 1325(b)(3).
☑ 2. Disposable income is determined under 11 U.S.C. § 1325(b)(3).
☐ 3. The commitment period is 3 years.
■ 4. The commitment period is 5 years.

☐ Check if this is an amended filing

Official Form 122C-1

Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period 12/15



Part 1:

Calculate Your Average Monthly Income

- 1. What is your marital and filing status? Check one only.
- Not married. Fill out Column A, lines 2-11.
- Married. Fill out both Columns A and B, lines 2-11.

Fill in the average monthly income that you from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space.

				Column A Debtor 1	Column B Debtor 2
2.	Your gross wages, salary, tips, bonuses, overtime, and capayroll deductions).	ommissions (before all	2.	\$1,893.46	
3.	Alimony and maintenance payments. Do not include payments. Bis filled in.	ents from a spouse if	3.	\$0.00	
4.	All amounts from any source which are regularly paid for you or your dependents, including child support. Include an unmarried partner, members of your household, your deperonmates. Include regular contributions from a spouse only Do not include payments you listed on line 3.	regular contributions from endents, parents, and	4.	\$0.00	
5.	Net income from operating a business, profession, or far	· · · · · · · · · · · · · · · · · · ·			
	Gross receipts (before all deductions)	\$3,750.00			
	Ordinary and necessary operating expenses	\$0.00			
	Net monthly income from a business, profession, or farm	5.	\$1,087.49		
3.	Net income from rental and other real property				
	Gross receipts (before all deductions)	\$0.00			
	Ordinary and necessary operating expenses	\$0.00			
	Net monthly income from rental or other real property		6.	\$0.00	same and second of the

Case.18-02404-BK113			10 10:12:7	.5 Desc. Main
Debtor 1 OMAR DAVILA-MEJIAS	Document	Page 36 of 43		Case number:18-02464
7. Interest, dividends, and royalties			7. \$0	D.00

7.	Interest, dividends, and royalties		7	\$0.00	
8.	Unemployment compensation				
	Do not enter the amount if you contend to Social Security Act. Instead, list it here:	hat the amount received v	as a benefit under the		
	For you	\$0.00			
	For your spouse	\$0.00			
				and the second s	Visioni in
			3	\$0.00	
9.	Pension or retirement income. Do not under the Social Security Act.	include any amount recei	ved that was a benefit	. \$0.00	
 10.	Income from all other sources not list	ed ahove. Specify the so	irce and amount. Do not		
10.	include any benefits received under the svictim of a war crime, a crime against hu	Social Security Act or pay	nents received as a	. \$0.00	
11.	Calculate your total current monthly in Then add the total for Column A to the total	ncome. Add lines 2 throug tal for Column B.	th 10 for each column: <u>\$2,980.95</u> + <u>N//</u>	<u>\</u> . 11	\$2,980.95
Par			icome		
12.	Copy your total average monthly inco	me from line 11.		12.	\$2,980.95
13.	Calculate the marital adjustment. Che				
	You are not married. Fill in 0 in line You are married and your spouse is You are married and your spouse is	filing with you. Fill in 0 in	line 13.		
	Fill in the amount of the income liste household expenses of you or your spouse's support of someone other				
	In the following lines, specify the ba each purpose. If necessary, list add	to			
	If this adjustment does not apply, er	nter 0 on line 13.			
	a.		· · · · · · · · · · · · · · · · · · ·		
		Total:	\$0.00		
	Total. Add the previous lines and insert t	he total here.	······································	13.	\$0.00
14.	Your current monthly income. Subtrac			14.	\$2,980.95
15.	Calculate your current monthly incom	e for the year. Follow the	se steps:		
	Copy your total current monthly income fr	om line 14.	\$2,980.95		
	Multiply by 12 (the number of months in a	year).	\$35,771.40		
	The result is your annual income for this	part of the form.		15.	\$35,771.40
16.	Calculate the median family income th	at applies to you. Follow	these steps:		
	16a. Fill in the state in which you live.		Puerto Rico		
	16b. Fill in the number of people in your h	ousehold.	2		
	16c. Fill in the median family income for y household	our state and size of	\$24,455.00		
	To find a list of applicable median income instructions for this form. This list may also	e amounts, go online using	g the link specified in the separate	46	\$24.455.00

17. How do the lines compare? Line 15 is less than or equal to line 16. On the top of page 1 of this form, check box 1, Disposable income is not determined under 11 U.S.C. § 1325(b)(3). Go to Part 3. Do NOT fill out Calculation of Disposable Income (Official Form122C-2). 17b. 🛛 Line 15 is more than line 16. On the top of page 1 of this form, check box 2, Disposable income is determined under 11 U.S.C. § 1325(b)(3). Go to Part 3 and fill out Calculation of Disposable Income (Official Form 122C-2). On line 35 of that form, copy your current monthly income from line 14 above. Part 3: Calculate Your Commitment Period Under 11 U.S.C. §1325(b)(4) 18. Copy your total average monthly income from line 11. 18. \$2,980.95 19. Deduct the marital adjustment if it applies. If you are married, your spouse is not filing with you, and you contend that calculating the commitment period under 11 U.S.C. § 1325(b)(4) allows you to deduct part of your spouse's income, copy the amount from line 13. If the marital adjustment does not apply, fill in 0: \$0.00 \$2,980.95 Subtract this amount from line 18. 19. 20. Calculate your current monthly income for the year. Follow these steps: 20a, Copy your total current monthly income from line 19. 20a \$2,980.95 Multiply by 12 (the number of months in a year). x 12 20b. The result is your annual income for this part of the form. \$35,771.40 20b. 20c. Copy the median income for your state and size of household from line 16. 20c. \$24,455.00 21. How do the lines compare? Line 20b is less than line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 3, The commitment period is 3 years. Go to Part 4. Line 20b is more than or equal to line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 4, The M commitment period is 5 years. Go to Part 4. Part 4: Sign Below By signing here, under penalty of perjury I declare that the information on this statement and in any attachments is true and correct. /s/ OMAR DAVILA-MEJIAS 06/06/2018 Signature of Debtor 1 Date MM/DD/YYYY

If you checked 17a, do NOT fill out or file Form 122C-2.

If you checked 17b, fill out Form 122C-2 and file it with this form. On line 35 of that form, copy your current monthly income from line 14 above.

Fill in this information to identify your case:

04/01/2019

Check if this is an amended filing

Official Form 122C-2

Chapter 13 Calculation of Your Disposable Income

04/16

To fill out this form, you will need your completed copy of Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period (Official Form 122C-1).

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).



Calculate Your Deductions from Your Income

The Internal Revenue Service (IRS) issues National and Local Standards for certain expense amounts. Use these amounts to answer the questions in lines 6-15. To find the IRS standards, go online using the link specified in the separate instructions for this form. This information may also be available at the bankruptcy clerk's office.

Deduct the expense amounts set out in lines 6-15 regardless of your actual expense. In later parts of the form, you will use some of your actual expenses if they are higher than the standards. Do not deduct any amounts that you subtracted from your spouse's income in lines 5 and 6 of Form 122C-1 and do not deduct any operating expenses that you subtracted from income in line 13 of Form 122C-1.

If your expenses differ from month to month, enter the average expense.

Note: Line numbers 1-4 are not used in this form. These numbers apply to information required by a similar form used in chapter 7 cases.

5. The number of people used in determining your deductions from income

Fill in the number of people who could be claimed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support. This number may be different from the number of people in your household.

2

National Standards You must use the IRS National Standards to answer the questions in lines 6-7.

Food, clothing, and other items: Using the number of people you entered in line 5 and the IRS National Standards, fill in the dollar amount for food, clothing, and other items.

6. \$1,132.00

5.

Out-of-pocket health care allowance: Using the number of people you entered in line 5 and the IRS National Standards, fill in the dollar amount for out-of-pocket health care. The number of people is split into two categories -- people who are under 65 and people who are 65 or older, because older people have a higher IRS allowance for health care costs. If your actual expenses are higher than this IRS amount, you may deduct the additional amount on line 22.

People who are under 65 years of age	
7a. Out-of-pocket health care allowance per person	\$49.00
7b. Number of people who are under 65	2
7c. Subtotal. Multiply line 7a by line 7b.	\$98.00
People who are 65 years of age or older	
7d. Out-of-pocket health care allowance per person	\$117.00
7e. Number of people who are 65 or older	0
7f. Subtotal. Multiply line 7d by line 7e.	\$0.00

7g. Total. Add lines 7c and 7f.

\$98.00

Local Standards You must use the IRS Local Standards to answer the questions in lines 8-15.

Debtor 1 OMAR DAVILA-MEJIAS

Case number:18-02464

	Base parts	ed on information from the IRS, the U.S. Trustee Program has divided the IRS Local s:	Standard for housing for ba	nkruptcy purp	oses into two			
	●Housing and utilities - Insurance and operating expenses ●Housing and utilities - Mortgage or rent expenses							
	Тоа	nswer the questions in lines 8-9, use the U.S. Trustee Program chart.						
		nd the chart, go online using the link specified in the separate instructions for this for 's office.	rm. This chart may also be a	vailable at the	bankruptcy			
8.	Housing and utilities - Insurance and operating expenses: Using the number of people you entered in line 5, fill in the dollar amount listed for your county for insurance and operating expenses.							
9.	Hou	sing and utilities - Mortgage or rent expenses:						
•	9a.	Using the number of people you entered in line 5, fill in the dollar amount listed for your county for mortgage or rent expenses.	\$664.00					
_	9b.	Total average monthly payment for all mortgages and other debts secured by your home.						
	A first and a first and a state of a state o	To calculate the total average monthly payment, add all amounts that are contractually due to each secured creditor in the 60 months after you file for bankruptcy. Then divide by 60.						
	The state of the s	Name of creditor Average monthly payment						
		Total average monthly payment, Enter here and on line 33a.	\$0.00					
	9c.	Net mortgage or rent expense.						
	Subt	ract line 9b (total average monthly payment) from line 9a (mortgage or rent expense than \$0, enter \$0.	e). If this amount is	9.	\$664.00			
10.		u claim that the U.S. Trustee Program's division of the IRS Local Standard for affects the calculation of your monthly expenses, fill in any additional amount						
		ain why:	. you diamin	10.	\$0.00			
44		al transportation expenses: Check the number of vehicles for which you claim an	ownership or aperating evac		Ψ0.00			
11.	Loca		ownership or operating expe	nse.				
	X	0. Go to line 14. 1. Go to line 12. 2 or more. Go to line 12.						
12.		icle operation expense: Using the IRS Local Standards and the number of vehicles operating expenses, fill in the <i>Operating Costs</i> that apply for your Census region or r.		12.	\$500.00			
13.	expe	icle ownership or lease expense: Using the IRS Local Standards, calculate the ne ense for each vehicle below. You may not claim the expense if you do not make any nents on the vehicle. In addition, you may not claim the expense for more than two	loan or lease					
	Veh	icle 1 N/A						
	13a	. Ownership or leasing costs using IRS Local Standard	\$0.00	A Tarabah Anana				
	13b	. Average monthly payment for all debts secured by Vehicle 1.						
		Do not include costs for leased vehicles.		200.000				
	er Control on the control of the con	To calculate the average monthly payment here and on line 13e, add all amounts that are contractually due to each secured creditor in the 60 months after you filed for bankruptcy. Then divide by 60.						
	av 115 Smooth cond. On security.	Name of each creditor for Vehicle 1 Average Monthly Payment		The second of the second of the				
	The second second	Established and a Res 200	***	***************************************				
	ļ	Enter the total here and on line 33b.	\$0.00	a part a se				
	13c.	Net Vehicle 1 ownership or lease expense		9				
	\$10 PA 510	Subtract line 13b from line 13a. If this amount is less than \$0, enter \$0.	\$0.00	40-	¢0.00			

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	or 1 OMAR DAVILA-MEJIAS		number:18-0246
	Vehicle 2 N/A		
	13d. Ownership or leasing costs using IRS Local Standard \$0.00		
	13e. Average monthly payment for all debts secured by Vehicle 2. Do поt include costs for leased vehicles.		
	Name of each creditor for Vehicle 2. Average Monthly Payment	TO THE STATE OF TH	
	Enter the total here and on line 33c \$0.00		
	13f. Net Vehicle 2 ownership or lease expense		
	Subtract line 13e from 13d. If this amount is less than \$0, enter \$0. \$0.00	13f.	\$0.00
14.	Public transportation expense: If you claimed 0 vehicles in line 11, using the IRS Local Standards, fill in the Public Transportation expense allowance regardless of whether you use public transportation.	14.	\$0.00
15.	Additional public transportation expense: If you claimed 1 or more vehicles in line 11 and if you claim that you may also deduct a public transportation expense, you may fill in what you believe is the appropriate expense, but you may not claim more than the IRS Local Standard for Public Transportation.	15.	\$0.00
	Other Necessary Expenses in addition to the expense deductions listed above, you are allowed your monthly expens categories.	es for the	following IRS
16.	Taxes: The total monthly amount that you will actually owe for federal, state and local taxes, such as income taxes, self-employment taxes, social security taxes, and Medicare taxes. You may include the monthly amount withheld from your pay for these taxes. However, if you expect to receive a tax refund, you must divide the expected refund by 12 and subtract that number from the total monthly amount that is withheld to pay for taxes.		
	Do not include real estate, sales, or use taxes.	16.	\$0.00
7.	Involuntary deductions: The total monthly payroll deductions that your job requires, such as retirement contributions, union dues, and uniform costs.	100 mm	
	Do not include amounts that are not required by your job, such as voluntary 401(k) contributions or payroll savings.	17.	\$0.00
18.	Life insurance: The total monthly premiums that you pay for your own term life insurance. If two married people are filing together, include payments that you make for your spouse's term life insurance. Do not include premiums for life insurance on your dependents, for a non-filing spouse's life insurance, or for any form of life insurance other than term.	18.	\$0.00
19.	Court-ordered payments: The total monthly amount that you pay as required by the order of a court or administrative agency, such as spousal or child support payments.		
	Do not include payments on past due obligations for spousal or child support. You will list these obligations in line 35.	19.	\$1,200.00
20.	Education: The total monthly amount that you pay for education that is either required:	PAR A PARA DARA	
	as a condition for your job, or	3	
	 for your physically or mentally challenged dependent child if no public education is available for similar services. 	20.	\$0.00
21.	Childcare: The total monthly amount that you pay for childcare, such as babysitting, daycare, nursery, and preschool.	Accept to the second	
	Do not include payments for any elementary or secondary school education.	21.	\$200.00
22.	Additional health care expenses, excluding insurance costs: The monthly amount that you pay for health care that is required for the health and welfare of you or your dependents and that is not reimbursed by insurance or paid by a health savings account. Include only the amount that is more than the total entered in line 7. Payments for health insurance or health savings accounts should be listed only in line 25.	22.	\$0.00
23.	Telecommunication services: The total monthly amount that you pay for telecommunication services, such as pagers, call waiting, caller identification, special long distance, business internet service, or business cell phone service, to the extent necessary for your health and welfare or that of your dependents or for the production of income, if it is not reimbursed by your employer.	IN COLUMN TO THE PROPERTY OF A PRINCIPAL AND A	
	Do not include payments for basic home telephone, internet and cell phone service. Do not include self-employment expenses, such as those reported on line 5 of Official Form 122C-1, or any amount you	***************************************	

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	or 1 OMAR DAVILA-MEJIAS		Case	number:18-024
24.	Add all of the expenses allowed un	der the IRS expense allowances.	Γ	
	Add lines 6 through 23.		24	\$4,302.00
	Additional Expense Deductions The Note: Do not include any expense allo	ese are additional deductions allowed by the Means Test. wances listed in lines 6-24.		
25.		ce, and health savings account expenses. The monthly expenses and health savings accounts that are reasonably necessary for ents.	s for	
	Health Insurance	\$0.00		
	Disability Insurance	\$0.00	***************************************	
	Health Savings Account	\$0.00		
	Total	\$0.00	25.	\$0.00
	Do you actually spend the total amo	ount shown on the previous line?		
	☐ No. How much do you actually	spend? \$0.00	100 100 100 100 100 100	
	⊠ Yes		100 100 100 100	
26.	you will continue to pay for the reason	of household or family members. The actual monthly expenses to able and necessary care and support of an elderly, chronically ill, or member of your immediate family who is unable to pay for such	hat 26,	\$0.00
27.	Protection against family violence. the safety of you and your family under that apply.	The reasonably necessary monthly expenses that you incur to maint r the Family Violence Prevention and Services Act or other federal la	ain aws	
	By law, the court must keep the nature	e of these expenses confidential.	27.	\$0.00
28.	Additional home energy costs. You utilities allowance on line 8.	home energy costs are included in your non-mortgage housing and		
		rgy costs that are more than the home energy costs included in the owance, then fill in the excess amount of home energy costs.		
	You must give your case trustee docu additional amount claimed is reasonal	mentation of your actual expenses, and you must show that the ole and necessary.	28.	\$0.00
29.		children who are younger than 18. The monthly expenses (not mo for your dependent children who are younger than 18 years old to att ndary school.		
	You must give your case trustee docu amount claimed is reasonable and ne	mentation of your actual expenses, and you must explain why the cessary and not already accounted for in lines 6-23.	***************************************	
	* Subject to adjustment on 04/01/2019, and every	years after that for cases begun on or after the date of adjustment.	29.	\$0.00
30.	expenses are higher than the combine	se. The monthly amount by which your actual food and clothing od food and clothing allowances in the IRS National Standards. That e food and clothing allowances in the IRS National Standards.		
		additional allowance, go online using the link specified in the separa ay also be available at the bankruptcy clerk's office.	te	
	You must show that the additional am	ount claimed is reasonable and necessary.	30.	\$0.00
31.		. The amount that you will continue to contribute in the form of cash haritable organization. 26 U.S.C. § 170(c)(1)-(2).	or 31.	\$0.00
32.	Add all of the additional expense de	ductions.		
	Add lines 25 through 31.	The state of the s	32	\$0.00
	Deductions for Debt Payment			
33.	For debts that are secured by an in- loans, and other secured debt, fill in	erest in property that you own, including home mortgages, veh the following information.	icle	

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ebto	or 1 OM	AR DAVILA-MEJIAS	Document	Page 42 o	f 43	Case n	umber:18-02464
					Average monthly payment		
		Mortgages on your home) 				
	33a.	Copy line 9b here			\$0.00		
		Loans on your first two v	rehicles				
	33b.	Copy line 13b here			\$0.00		
	33c.	Copy line 13e here			\$0.00		
		Name of each creditor for other secured debt	Identify property that secures the debt	Does payment include taxes or insurance?			
	33d.						
	Total ave	erage monthly payment. Add	lines 33a through 33d.			33.	\$0.00
34.	Are any	debts that you listed in line	e 33 secured by your prima ert or the support of your de	ıry residence, a vel ependents?	nicle, or other		
		Go to line 35.	., -	•			
		s. State any amount that you p possession of your propert	must pay to a creditor, in add y (called the cure amount).	dition to the payment	ts listed in line 33, to		
			ntify property that secures the debt	Total cure amount			
	(None)						
	Total			\$0.00	The second secon		
	Divide th	e total by 60 and enter the re	esult here.			34.	\$0.00
35.			uch as a priority tax, child ptcy case? 11 U.S.C. § 507.		y that are past due		The second secon
	□ No.	Go to line 36.					
		s. Fill in the total amount of al ms, such as those you listed	l of these priority claims. Do in line 19.	not include current o	or ongoing priority		
	Tota	al amount of all past-due price	erity claims <u>\$16,930.80</u> ÷ 60 =	=		35.	\$282.18
36.		and the second of the second second second second	payment. Fill in the following		an an amaga garan ing ganggang ang ganggang ang sa	.,	
	Projecte	d monthly plan payment	m na mnak a jamanga arang a sa a sa a sa sa sa sa sa sa sa sa sa		\$0.00		
	Administ	trative Office of the United Starolina) or by the Executive (stated on the list issued by th lates Courts (for districts in A Office for United States Truste	labama and	8.00%		
	link spec	a list of district multipliers tha cified in the separate instruct e at the bankruptcy clerk's of	t includes your district, go onlions for this form. This list ma fice.	line using the ay also be			
	S					ţ	
	Average	monthly administrative expe	nse			36.	\$0.00
37.		monthly administrative expe	the contract theretaen by the contract of	, we make a source of the second seco	******	36.	\$0.00
37.	Add all o		the contract theretaen by the contract of		**************************************	36 -	\$0.00 \$282.18

38. Add all of the allowed deductions.

Case:18-02464-BKT13 Doc#:18 Filed:06/06/18 Entered:06/06/18 18:15:25 Desc: Main Document Page 43 of 43

Debtor 1 OMAR DAVILA-MEJIAS

Case number:18-02464

	line 24, All of the expenses allowed under IRS use allowances	\$4,302.00			
Сору	line 32, All of the additional expense deductions	\$0.00			
Сору	line 37, All of the deductions for debt payment	\$282.18			
Total d	eductions			38	\$4,584.18
ırt 2:	Determine Your Disposable Income Under 11 U.S.C. §	1325(b)(2)			
	our total current monthly income from line 14 of Form 12 Monthly Income and Calculation of Commitment Period		ent of Your	39.	\$2,980.9
childre disabili receive	any reasonably necessary income you receive for supporten. The monthly average of any child support payments, fostety payments for a dependent child, reported in Part I of Form that in accordance with applicable nonbankruptcy law to the extens to be expended for such child.	care payments, or 22C-1, that you	40.	\$0.00	
employ in 11 U	all qualified retirement deductions. The monthly total of all a ver withheld from wages as contributions for qualified retireme i.S.C. § 541(b)(7) plus all required repayments of loans from red in 11 U.S.C. § 362(b)(19).	nt plans, as specified	41.	\$0.00	
. Total c	of all deductions allowed under 11 U.S.C. § 707(b)(2)(A). C	nny line 38 here	42.	\$4,584.18	
. Deduc reason	tion for special circumstances. If special circumstances jus able alternative, describe the special circumstances and their a detailed explanation of the special circumstances and docu	tify additional expenses an expenses. You must give mentation for the expense	your case		
. Deduc reason	able alternative, describe the special circumstances and their a detailed explanation of the special circumstances and docu Describe the special circumstances	tify additional expenses a expenses. You must give	your case	\$0.00	
. Deduc reason trustee (None	able alternative, describe the special circumstances and their a detailed explanation of the special circumstances and docu Describe the special circumstances	tify additional expenses al expenses. You must give mentation for the expense Amount of expense	your case es.	\$0.00 \$4,584.18	
. Deduc reason trustee (None	able alternative, describe the special circumstances and their a detailed explanation of the special circumstances and docu Describe the special circumstances Total:	tify additional expenses at expenses. You must give mentation for the expense Amount of expense \$0.00	your case es. 43. 44.		(\$1,603.23
(None)	able alternative, describe the special circumstances and their a detailed explanation of the special circumstances and docu Describe the special circumstances Total:	tify additional expenses at expenses. You must give mentation for the expense Amount of expense \$0.00	your case es. 43. 44.	\$4,584.18	(\$1,603.23
(None) Total a Calculant 3: Change change the was	able alternative, describe the special circumstances and their a detailed explanation of the special circumstances and docu Describe the special circumstances Total: adjustments. Add lines 40 through 43. ate your monthly disposable income under § 1325(b)(2).	atify additional expenses at expenses. You must give mentation for the expense. Amount of expense \$0.00 Subtract line 44 from line 3 to expense will be compared to the first column, ending the expense will be compared to the first column, ending the expense will be compared to the first column, ending the expense of the first column, ending the first column, ending the expense of the first column, ending the first column, ending the expense of the ex	your case es. 43. 44. 39. In this form hav pen, fill in the in	\$4,584.18 45 e changed or are formation below.	virtually certain For example, if
(None) Total a Calculate Change the wages	able alternative, describe the special circumstances and their a detailed explanation of the special circumstances and documents. Describe the special circumstances Total: Adjustments. Add lines 40 through 43. ate your monthly disposable income under § 1325(b)(2). Such a company of the income or expenses the in income or expenses. If the income in Form 122C-1 or the date you filed your bankruptcy petition and during the ges reported increased after you filed your petition, check 122	atify additional expenses at expenses. You must give mentation for the expense. Amount of expense \$0.00 Subtract line 44 from line 3 to expense will be compared to the first column, ending the expense will be compared to the first column, ending the expense will be compared to the first column, ending the expense of the first column, ending the first column, ending the expense of the first column, ending the first column, ending the expense of the ex	your case es. 43. 44. 39. in this form have pen, fill in the inter line 2 in the	\$4,584.18 45 e changed or are formation below. second column, e	virtually certain For example, if xplain why the nt of
(None) Total a Calculatt 3: Change change the wag wages	able alternative, describe the special circumstances and their a detailed explanation of the special circumstances and documber of the special circumstances. Describe the special circumstances Total: Adjustments. Add lines 40 through 43. ate your monthly disposable income under § 1325(b)(2). State your monthly disposable income under § 1325(b)(2). State in income or expenses. If the income in Form 122C-1 or the after the date you filed your bankruptcy petition and during the ges reported increased after you filed your petition, check 122 increased, fill in when the increase occurred, and fill in the ansert of the income in Form Line Reason for change	tify additional expenses at expenses. You must give mentation for the expense Amount of expense \$0.00 Subtract line 44 from line 3 time your case will be cC-1 in the first column, enount of the increase.	your case 9s. 43. 44. 39. in this form hav pen, fill in the in the line 2 in the	\$4,584.18 45 e changed or are formation below, second column, e	virtually certain For example, if xplain why the nt of
. Deduc reason trustee (None) . Total a Calculat 3: . Change change the was wages	able alternative, describe the special circumstances and their a detailed explanation of the special circumstances and documber of the special circumstances. Describe the special circumstances Total: Adjustments. Add lines 40 through 43. ate your monthly disposable income under § 1325(b)(2). Such a service of the date you filed your bankruptcy petition and during the ges reported increased after you filed your petition, check 122 increased, fill in when the increase occurred, and fill in the arreference. Form Line Reason for change	tify additional expenses at expenses. You must give mentation for the expense Amount of expense \$0.00 Subtract line 44 from line 3 time your case will be cC-1 in the first column, enount of the increase.	your case es. 43. 44. 39. in this form have pen, fill in the inter line 2 in the inter line 2 in the decrease Increase Increase	\$4,584.18 45 e changed or are formation below, second column, e	virtually certain For example, if xplain why the nt of

/s/ OMAR DAVILA-MEJIAS

Signature of Debtor 1

06/06/2018

Date MM/DD/YYYY